

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715454

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE EXECUTIVE CLUB OF NAPLES, INC.

Current Principal Place of Business:

4306 ARNOLD AVENUE
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110339
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 59-1291904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUETER, BEVERLY
C/O SUNBURST MGMT. CORP
4306 ARNOLD AVE
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MCKENNA, JOHN
Address: 3300 GULF SHORE BLVD. N. #115
City-St-Zip: NAPLES, FL 34103

Title: DT () Delete
Name: NONKEN, SARA
Address: 3300 GULF SHORE BLVD N #209
City-St-Zip: NAPLES, FL 34103

Title: DS () Delete
Name: MASSI, BETTY
Address: 3300 GULFSHORE BLVD N #113
City-St-Zip: NAPLES, FL

Title: DVP () Delete
Name: COLLINS, ART
Address: 3300 GULF SHORE BLVD. N #211
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: BRYAN, DICK
Address: 3300 GULF SHORE BLVD. N. #309
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: EVERLY, BARB
Address: 3300 GILF SHORE BLVD. N. #112
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: STONE, PETER
Address: 3300 GULF SHORE BLVD N #206
City-St-Zip: NAPLES, FL 34103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PRATT, LEONID
Address: 3300 GILF SHORE BLVD. N. #202
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MCKENNA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date